MEDICATION-ASSISTED TREATMENT CENTERS OF EXCELLENCE

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NATIONAL RECOVERY MONTH 2022

National Recovery Month, which started in 1989, is a national observance held every September to promote and support new evidence-based treatment and recovery practices, the nation's strong and proud recovery community, and the dedication of service providers and communities who make recovery in all its forms possible. SAMHSA aims to increase public awareness surrounding mental health and addiction recovery. This year, to address the nation's growing crisis of substance misuse and overdose deaths, SAMHSA is launching initiatives that promote and support evidence-based treatment and recovery practices, the emergence of a strong and proud recovery community, and the dedication of service providers and community members across the nation who make recovery possible.

Read the White House Proclamation on National Recovery Month, 2022

Ref: https://www.samhsa.gov/recovery-month

WHAT'S INSIDE

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So Why Don't More Patients With OUD Take Methadone?

BuNa vs. Methadone Opioid Rotation for OUD & Chronic Pain

Open-Label Rapid Initiation Study for BUP-XR Subcutaneous Injection

Increased Telehealth for OUD Services During COVID-19 & Reduced Risk of Overdose

Brightly-Colored Fentanyl Used to Target Young Americans

Gov Murphy Announces Online Portal & Advisory Council on Use of Opioid Settlement Funds

RESOURCES

Recovery Month 2022

UPCOMING EVENTS



OBAT NAVIGATOR MONTHLY RESOURCE CALLS & SKILLS LAB

THURSDAY, SEPTEMBER 15TH FROM 12:00-1:00 PM

The Camden Coalition is offering monthly resources calls & skills labs to provide ongoing opportunity for OBAT navigators & other SUD navigators/case managers to continue learning through:

- Hour-long deep dive of particular content areas
- Discussion of (de-identified) patient cases & support thinking through patient engagement strategies, potential resources, & how to practice self-care while doing this work
- Presentations & sharing updated resources about relevant topics

These events take place every 3rd Thursday of the month from 12pm - 1pm

MAT LUNCH HOUR: HOPE ONE MOBILE RECOVERY UNITS

WEDNESDAY, SEPTEMBER 28TH FROM 12:00-1:00 PM

The MAT Lunch Hours are hour-long virtual meetings to hear from experts and discuss the latest in clinical and non-clinical issues affecting the MAT patient population.

TENTH ANNUAL URBAN MENTAL HEALTH CONFERENCE

THURSDAY, NOVEMBER 3RD FROM 8:00 AM - 3:00 PM

We are very excited to announce Urban Mental Health 2022, the Tenth Annual Conference of Rutgers NJMS Dept of Psychiatry— now back to live and in-person! This year, we will explore SUD in the age of fentanyl and other highly potent synthetic opioids. A panel of experts will discuss the most recent developments in the field ranging from the complexities of the neurobiology of addiction to the conundrums of co-morbid addiction and other psychiatric disorders. We are also going to discuss the challenges of using drug screens, and the societal responsibility of helping people achieve a realistic path to recovery. When you attend the Urban Mental Health 2022 conference, you will:

- Review the latest scientific developments in the assessment and treatment of addiction.
- Learn through interactive case scenarios led by our psychiatry residents and speakers.
- Sharpen practical skills that can be readily applied to everyday clinical work.
- Participate in the residents' noontime research symposium.
- Receive a complete electronic set of the conference handout materials.
- Earn Continuing Education credits.
- Enjoy a delicious lunch and network with your colleagues.

RECENT NEWS

METHADONE SAVES LIVES. SO WHY DON'T MORE PATIENTS WITH OPIOID USE DISORDER TAKE IT?

Methadone, in addition to buprenorphine, reduces overdose deaths and infectious disease transmission, and both support one's road to recovery. Those who seek methadone for OUD can still only receive treatment directly from opioid treatment programs. Continued loosening of the federal regulations amid the COVID-19 pandemic, however, have continued to allowed more people to safely access the medication. This interview by PEW features Dr. Rachel Simon and Abby Coulter who discuss the following:

What has opioid treatment program care traditionally looked like?
What's changed since the pandemic?
Rather than having to come to a clinic in person every day for a dose?
So since the pandemic began OTPs have been able to send more patients home with take-home methadone doses. Did all OTPs do so?
Have we learned anything from allowing more patients to take this medication home?
Are more patients coming to OTPs as a result of the loosened restrictions?
Can you explain how accessing methadone differs from accessing buprenorphine?
You've referenced some of the challenges you've seen in OTPs. Can you say more about that?
How would you change methadone treatment?
Parity how? In terms of how they're dispensed?
What other benefits would there be of pharmacy-based dispensing?

Dr. Simon concludes, "We need to frame methadone as not simply an OUD treatment, but as an invaluable tool for overdose prevention. We need to put methadone treatment for OUD back in the hands of health care providers and do so in a way that allows methadone treatment to be accessible, equitable, and patient-centered."

BUPRENORPHINE/NALOXONE VERSUS METHADONE OPIOID ROTATION IN PATIENTS WITH PRESCRIPTION OPIOID USE DISORDER AND CHRONIC PAIN: STUDY PROTOCOL FOR A RANDOMIZED CONTROLLED TRIAL

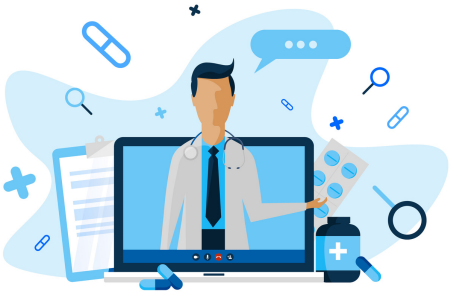
This is a study protocol seeking to assess opioid rotation from a short-acting full-agonist opioid to a long-acting opioid (buprenorphine/naloxone or methadone) in those with OUD and chronic pain. It is a two-armed open-label, randomized controlled trial aiming to compare the two therapies for patients with these conditions. Results of this large study may help to guide future treatment for patients with chronic pain and prescription OUD beyond opioid tapering.



RECENT NEWS

OPEN-LABEL, RAPID INITIATION PILOT STUDY FOR EXTENDED-RELEASE BUPRENORPHINE SUBCUTANEOUS INJECTION

This pilot study aims to examine a rapid initiation of extended-release injectable buprenorphine (BUP-XR), which would usually require a period of stabilization on transmucosal buprenorphine prior to initiation. Given the challenges of inducting with transmucosal buprenorphine, assessing methods to quickly achieve sustained buprenorphine concentrations is important. This open-label, single-group, single-center pilot study evaluated safety and tolerability of initiating BUP-XR following a single BUP-TM 4 mg dose. Twenty-six participants (14 male) received BUP-TM, 24 received BUP-XR, and 20 completed the study. Results support increased flexibility for initiating BUP-XR, with COWS scores decreasing significantly. It therefore finds that initiating BUP-XR 300 mg following a single BUP-TM 4 mg dose was well tolerated, providing more evidence that BUP-XR may be initiated sooner.



INCREASED USE OF TELEHEALTH FOR OUD SERVICES DURING COVID-19 PANDEMIC ASSOCIATED WITH REDUCED RISK OF OVERDOSE

This study was a collaborative effort led by researchers at the National Center for Injury Prevention and Control, a part of the CDC; the NIDA, part of the NIH; and CMS. The analysis examined how telehealth services for OUD impacted the number of people who experienced a medically treated overdose after starting a new episode of care prior to the pandemic compared to those during the pandemic. Findings show that those in the COVID-19 pandemic group were more likely to receive OUD-related telehealth services. In addition, receipt of OUD-related telehealth services was associated with significantly better MOUD treatment retention and lower risk of medically treated overdose compared to those not receiving OUD-related telehealth services. Despite these reported telehealth benefits, the study also determined some groups were less likely to receive these services, including non-Hispanic black persons and those living in the South. These outcomes underscore the need for future efforts to focus on eliminating the digital divide and ensuring equitable access to care and services. This study serves provides evidence in how maintaining access to telehealth services for patients with OUD should be continued beyond the pandemic.

RECENT NEWS



DEA WARNS OF BRIGHTLY-COLORED FENTANYL USED TO TARGET YOUNG AMERICANS

The DEA is advising the public of an alarming emerging trend of colorful fentanyl available across the US. In August 2022, DEA and law enforcement partners seized brightly-colored fentanyl and fentanyl pills in 18 states. Dubbed "rainbow fentanyl" in the media, this trend appears to be a new method used by drug cartels to sell highly addictive and potentially deadly fentanyl made to look like candy to children and young people. Rainbow fentanyl is being seized in multiple forms, including pills, powder, and blocks. Every color, shape, and size of fentanyl should be considered extremely dangerous. Fentanyl is a synthetic opioid that is 50 times more potent than heroin and 100 times more potent than morphine. Just two milligrams of fentanyl, which is equal to 10-15 grains of table salt, is considered a lethal dose. Without laboratory testing, there is no way to know how much fentanyl is concentrated in a pill or powder. Fentanyl remains the deadliest drug threat facing this country. Drug poisonings are the leading killer of Americans between the ages of 18 and 45. In September 2021, DEA launched the One Pill Can Kill Public Awareness Campaign to educate Americans about the dangers of fake pills. Additional resources for parents and the community can be found on DEA's Fentanyl Awareness page.

GOV MURPHY ANNOUNCES CREATION OF ONLINE PORTAL & ADVISORY COUNCIL TO RECEIVE INPUT FROM MEMBERS OF PUBLIC, STAKEHOLDERS ON USE OF OPIOID SETTLEMENT FUNDS

As part of the Administration's ongoing efforts to help New Jerseyans impacted by the opioid crisis, and in recognition of Overdose Awareness Day, Governor Murphy announced a new online portal and Executive Order 305, which are two methods through which members of the public and relevant stakeholders can provide their input on the best use of the opioid settlement funds. Executive Order No. 305 establishes an Opioid Recovery and Remediation Advisory Council who will make recommendations for the Administration's consideration regarding the prioritization and effective use of these funds. The online portal will give any member of the public – including treatment providers, residents with SUD and their loved ones, advocates, and social service organizations – the opportunity to weigh in on how these funds should be used. Input can range from general suggestions to specific project proposals. Relevant state agencies will review and consider each proposal as part of the process to develop spending plans, programs, and evaluations for the funds. The portal will be open for an initial 60-day comment period to inform planning and will re-open annually to facilitate ongoing input on the State's opioid response and prevention efforts. As as community stakeholders, we would like to encourage our readers to review the information provided and contribute to the open comments, when available.

RESOURCES



NJ MAT CENTERS OF EXCELLENCE CELEBRATE RECOVERY MONTH 2022 AND ALL PEOPLE IN ALL STAGES OF RECOVERY

Throughout Recovery Month and year-round, the NJ MAT Centers of Excellence recognize and celebrate all people in all stages of recovery. As a multidisciplinary group of medical specialists, interdisciplinary professionals, and peer specialists, we know that the process of healing is nonlinear, that a small step forward is progress, and that a step backward is never failure. We believe in our patients and all people struggling with substance use and SUD. Our clinical care ethos, always: No shame. No stigma. We are here for you and we will never give up on you.

Together we remain dedicated to our shared NJMATCOEs mission of increasing statewide capacity to provide MAT through mentoring and education, building working collaborations within the community, and conducting research and developing innovative clinical delivery models. We are grateful for ongoing support of our work from the State and all providers and community stakeholders, and for continued and new connections and collaborations to advance low-barrier and lifesaving MAT across all communities.

Please share our team's patient health communication handouts across clinical settings and social media, throughout Recovery Month and year-round. Our hope in creating these materials for patients across our practice settings in addition to all community stakeholders throughout the state is that they serve as a gentle reminder for those who may be struggling with substance use and SUD: Our clinical practice settings are safe, judgment-free, and supportive spaces. Please reach out. We are here to help.

MEDICATION-ASSISTED TREATMENT
CENTERS OF EXCELLENCE

24/7 MAT Provider Hotline: 844-HELP OUD (844-435-7683)

Northern NJ MAT COE Website & Email
Southern NJ MAT COE Website & Email